PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

75		OIP	3	Note: A certificate of mailing can only be used for domestic mailings of t Fee(s) Transmittal. This certificate cannot be used for any other accompanyi papers. Each additional paper, such as an assignment or formal drawing, much as its own certificate of mailing or transmission.						
PIPER RUDNICK 1200 Nineteenth St Washington, DC 20	reet, N.W.	ADD 1 D	2005	I hereby certify that States Postal Service addressed to the Ma transmitted to the US	ertificate of Mailing or Tra this Fee(s) Transmittal is be with sufficient postage for ail Stop ISSUE FEE addre PTO (703) 746-4000, on the	insmission sing deposited with the Uni first class mail in an envele ss above, or being facsim e date indicated below.				
,		APK 10	₩,			(Depositor's nam				
9/2005 SZEWDIE2 00000	041 10660748	TRADE	ABY			(Signatu				
C:2501	700.00 DP	MADE	No.		·	(Da				
APPLICATION NO.	FILING DATE	FII	RST NAMED I	NVENTOR	ATTORNEY DOCKET NO	CONFIRMATION NO.				
10/660,748	09/12/2003		Michael I. Bu	ıkrinsky	9511-108-27 CONT	5987				
TITLE OF INVENTION: CO	OMPOUNDS AND METHO	DDS OF USE TO TR	EAT INFECT	FIOUS DISEASES						
APPLN, TYPE	APPLN, TYPE SMALL ENTITY			PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE				
nonprovisional	\$700		\$300	\$1000	05/17/2005					
EXAM	ART UNIT		CLASS-SUBCLASS	7						
RAYMOND,		1624		514-256000	_					
Change of correspondence		oo Addross" (37	2 For printin	ng on the patent front page,	liet	EN B. KELBER				
"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	ence address (or Change of (2) attached. ion (or "Fee Address" Indica or more recent) attached. Use	ation form e of a Customer	or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND PLEASE NOTE: Unless					nee is identified below, the	e document has been filed				
recordation as set forth in	37 CFR 3.11. Completion	of this form is NOT a	substitute for	r filing an assignment.	gnee is identified below, the					
(A) NAME OF ASSIGNE	EE	(B) I	RESIDENCE:	(CITY and STATE OR CO	DUNTRY)					
CYTOKINE PHAR	MASCIENCES, IN	С. К	ING OF	PRUSSIA, PA	•					
Please check the appropriate	assignee category or catego	ries (will not be print	ed on the pate	ent): 🗖 Individual 🛱	Corporation or other private	group entity 🚨 Governm				
4a. The following fee(s) are	enclosed:		b. Payment of Fee(s):							
Issue Fee			A check in the amount of the fee(s) is enclosed.							
_	mall entity discount permitte		Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 50-1442 (enclose an extra copy of this form).							
Advance Order - # of	Copies	B	eposit Accou	nt Number 50-1442	enclose an extra	or credit any overpayment a copy of this form).				
5. Change in Entity Status	(from status indicated above MALL ENTITY status. See	·	b. Applican	t is no longer claiming SM	ALL ENTITY status. See 37	CFR 1.27(g)(2).				
					sly paid issue fee to the appl gistered attorney or agent; o					
merest as shown by the reco	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	11 1								
Authorized Signature	M	//M		Date	<u> April 18, 200</u>)5				

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



DLA PIPER RUDNICK GRAY CARY U.S. LLP

1200 NINETEENTH STREET, NW WASHINGTON, DC 20036-2412 TELEPHONE: 202-861-3900 FACSIMILE: 202-223-2085

DOCKET NO.: 9511-108-27 CONT

ASSISTANT COMMISSIONER FOR PATENTS PO BOX 1450 **ALEXANDRIA, VA 22313-1450**

Re:

Serial No.:

10/660,748

Applicant(s): MICHAEL I. BUKRINSKY, ET AL.

Filing Date:

SEPTEMBER 12, 2003

For:

COMPOUNDS AND METHODS OF USE TO TREAT

INFECTIOUS DISEASES

Group Art Unit: 1624

Examiner:

RICHARD L. RAYMOND

SIR:

Attached hereto for filing are the following papers:

FEE TRANSMITTAL ISSUE/PUBLICATION FEE TRANSMITTAL

Our check in the amount of \$1,000.00 is attached covering any required fees. In the event any variance exists between the amount enclosed and the Patent Office charges for filing the abovenoted documents, including any fees required under 37 C.F.R. 1.136 for any necessary extension of time to make the filing of the attached documents timely, please charge or credit the difference to Deposit Account No. 50-1442. Further, if these papers are not considered timely filed, then a request is hereby made under 37 C.F.R. 1.136 for the necessary extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

DLA PIPER RUDNICK GRAY CARY U.S. LLP

Steven B. Kelber Attorney of Record

Registration No.: 30,073

John K. Pike, Ph.D.

Registration No.: 41,253



 Docket No.
 9511-108-27 CONT

 Serial No.
 10/660,748

 Filing Date
 September 12, 2003

 Inventor(s)
 Michael I. BUKRINSKY, et al.

 Group Art Unit
 1624

 Examiner
 Richard L. Raymond

1. ■	■ Applicant claims small entity status.									FEE CALCULATION (continued)								
	Charge any <u>UNDERPAYMENT</u> or credit any <u>OVERPAYMENT</u> in the indicated fees to Deposit Account No. 50-1442.										YMENT	3. ADDITIONAL FEES						
0										Large Entity Small Entity			Entity	Fee Description				
2. ■ Check enclosed.								Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee Paid					
FEE CALCULATION							1051	130	2051	65	Surcharge-late filing fee or oath							
1. BASIC FILING FEE							1053	130	1053	130	Non-English Specification							
Large Entity Small Entity Fee Description								1251	120	2251	60	1-mo, ext. of time						
Code	Fee \$	Code	Fee \$						F	ee Paid	1252	450	2252	225	2-mo. ext. of time			
1011	300	2011		150		Utility Fling Fee					1253	1020	2253	510	3-mo. ext. of time			
1012	200	2012		100		Design Filing Fee					1254	1590	2254	795	4-mo. ext. of time			
1013	200	2013		100		Plant Filing Fee					1255	2160	2255	1080	5-mo. ext. of time			
1014	300	2014		150		Reissue Filing Fee					1401	500	2401	250	Notice of Appeal			
1005	200	2005		100		Provisional Filing Fee					1402	500	2402	250	Appeal Brief			
1111	500	2111		250		Utility Search Fees					1403	1000	2403	500	Request for Oral			
1311	200	2311		100		Utility Examination Fees						1501	1400	2501	700	Utility/Reissue Issue	700	
SUBTOTAL \$0.00							\$0.00	1504	300	1504	300	Publication Fee	300					
2. EXTRA CLAIM FEES							·	8001	3	8001	3	Advance Copy of Patent						
tot. cla	aims			- 20)*	=	0	×	\$25	=	0	1806	180	1806	180	IDS Submission		
ind. cl	aims			- 3*		=	0	×	\$100	=	0	8021	40	8021	40	Assignment Recordation		
	Multiple	Depe	nde	nt Clai	ims				\$180	=		1801	790	2801	395	For Filing RCE		
					,				SUBTO	ΓAL	0	1814	130	2814	65	Terminal Disclaimer		
3. APPLICATION SIZE FEES							Other:				·							
Total # of Sheets # of Extra Sheets						ets												
- 100 = 0																		
50 frac	# of each additional 50 sheets or fraction thereof (round up)			Fee	е				Total Fe	e Du	<u> </u>					SUBTOTAL	1000	
	· · · · · · · · · · · · · · · · · · ·					=						<u> </u>					1	
x \$125 = 0																		

Name	Steven B. Kelber		Registration No.	30,073		
Signature	MH /	Date	April 18, 2005	Telephone	202-861-3900	
Name	John K. Pike, Ph.D.		Registration No.	41,253		